PHA Plans

Streamlined Annual Version

U.S. Department of Housing and Urban Development Office of Public and Indian

OMB No. 2577-0226

(exp. 05/31/2006)

Office of Public and Indian Housing

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief for certain types of PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

Streamlined Annual PHA Plan

for Fiscal Year: 2008 AMENDED

(05/01/2009)

PHA Name:

Millington Housing Authority 4888 Bill Knight Road Millington, Tennessee 38053

TN045v02

Final Copy

NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue.

form **HUD-50075-SA** (4/30/2003)

Streamlined Annual PHA Plan Agency Identification

| PHA Name: Millington Ho | ousing A | uthority PH | A Number: TN | 045 |
|---|--|---|---|----------------------------|
| PHA Fiscal Year Beginnin | g: (mm/ | (yyyy) 04/2008 | | |
| PHA Programs Administer Public Housing and Section Number of public housing units: Number of S8 units: | 8 Se | | ublic Housing Onler of public housing units | |
| PHA Consortia: (check be | ox if subn | nitting a joint PHA I | Plan and complete | table) |
| Participating PHAs | PHA Code | Program(s) Included in the Consortium | Programs Not in the Consortium | # of Units Each Program |
| Participating PHA 1: | | Not Applicable | | |
| Participating PHA 2: | | | | |
| Participating PHA 3: | | | | |
| PHA Plan Contact Information Name: Ms. Tanya Martchek, Executive TDD: NA Public Access to Information Information regarding any action (select all that apply) | e Director on ivities out | _ | : mha@bigriver.com | |
| PHA's main administrativ | ve office | PHA's deve | lopment manageme | ent offices |
| Display Locations for PHA | Plans a | and Supporting D | ocuments | |
| The PHA Plan revised policies of public review and inspection. If yes, select all that apply: Main administrative offic PHA development manage Main administrative offic Public library | Yes e of the P gement off e of the lo PHA we | ☐ No. HA Fices ocal, county or State gobsite ☐ 0 | overnment Other (list below) | |
| PHA Plan Supporting Document Main business office of th Other (list below) | | | (select all that appoper management) | • |

HA Code: TN045

Streamlined Annual PHA Plan

Fiscal Year 2008

[24 CFR Part 903.12(c)]

Table of Contents

[24 CFR 903.7(r)]

Provide a table of contents for the Plan, including applicable additional requirements, and a list of supporting documents available for public inspection.

| Δ | PHA | PI. | AN | COM | IPONF | STN |
|---|-----|-----|----|-----|--------------|------------|
| | | | | | | |

| | 1. | Site-Based Waiting List Policies Not Applicable |
|-------------|----|---|
| | | 903.7(b)(2) Policies on Eligibility, Selection, and Admissions |
| | 2. | Capital Improvement Needs |
| | | 903.7(g) Statement of Capital Improvements Needed |
| | 3. | Section 8(y) Homeownership Not Applicable |
| | | 903.7(k)(1)(i) Statement of Homeownership Programs |
| | 4. | Project-Based Voucher Programs Not Applicable |
| \boxtimes | 5. | PHA Statement of Consistency with Consolidated Plan. Complete only if PHA |
| | | has changed any policies, programs, or plan components from its last Annual |
| | | Plan. |
| | 6. | Supporting Documents Available for Review |
| \square | 7. | Capital Fund Program and Capital Fund Program Replacement Housing Factor, |
| | | Annual Statement/Performance and Evaluation Report |
| \boxtimes | 8. | Capital Fund Program 5-Year Action Plan |
| | ٥. | |
| | 9. | Other: Violence Against Women Act—Statement and Policy |

B. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

Form HUD-50076, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*: *Board Resolution to Accompany the Streamlined Annual Plan* identifying policies or programs the PHA has revised since submission of its last Annual Plan, and including Civil Rights certifications and assurances the changed policies were presented to the Resident Advisory Board for review and comment, approved by the PHA governing board, and made available for review and inspection at the PHA's principal office;

For PHAs Applying for Formula Capital Fund Program (CFP) Grants:

Form HUD-50070, Certification for a Drug-Free Workplace;

Form HUD-50071, Certification of Payments to Influence Federal Transactions; and

Form SF-LLL &SF-LLLa, Disclosure of Lobbying Activities.

1. Site-Based Waiting Lists (Eligibility, Selection, Admissions

Policies) **Not Applicable**

[24 CFR Part 903.12(c), 903.7(b)(2)]

Exemptions: Section 8 only PHAs are not required to complete this component.

Site-Based Waiting Lists-Previous Year A. Not Applicable

1. Has the PHA operated one or more site-based waiting lists in the previous year? No If yes, complete the following table; if not skip to B.

| | SITE-BASED WAITING LISTS | | | | | | | | | |
|---|--------------------------|--|---|---|--|--|--|--|--|--|
| Development Information: (Name, number, location) | Date Initiated | Initial mix of Racial, Ethnic or Disability Demographics | Current mix of Racial, Ethnic or Disability Demographics since Initiation of SBWL | Percent change between initial and current mix of Racial, Ethnic, or Disability demographics | | | | | | |
| | | Not Applicable | | | | | | | | |
| | | | | | | | | | | |

| 2. | What is the numb one time? | er of site bas | sed waiting list develo | pments to which fami | lies may apply a |
|----|-------------------------------------|-----------------------|--|--|-------------------------------------|
| 3. | How many unit of based waiting list | • | applicant turn down l | pefore being removed | from the site- |
| 4. | Yes No: | or any cour agreement | t order or settlement a or complaint and desc t violate or be inconsis | nding fair housing corngreement? If yes, describe how use of a site stent with the order, as | scribe the order, -based waiting |
| В. | Site-Based Wai | ting Lists | – Coming Year | Not Applicable | е |
| | - | | nore site-based waiting | g lists in the coming y | ear, answer each |

If

| 1. | How many | site-based | waiting | lists will | the PHA | operate | in the | coming | year? |
|----|----------|------------|---------|------------|---------|---------|--------|--------|-------|
|----|----------|------------|---------|------------|---------|---------|--------|--------|-------|

Yes No: Are any or all of the PHA's site-based waiting lists new for the 2. upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)? If yes, how many lists?

Streamlined Annual Plan for Fiscal Year 2008

Requiring that financing for purchase of a home under its Section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply

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Streamlined Annual Plan for Fiscal Year 2008

3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

<u>6. Supporting Documents Available for Review for Streamlined Annual PHA Plans</u>

PHAs are to indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

| | LIST OF SUPPORTING DOCUMENTS AVAILABLE FOR REVIEW | | | | | | | | |
|-------------------------|---|--|--|--|--|--|--|--|--|
| Applicable & On Display | Supporting Document | Related Plan Component | | | | | | | |
| NA | PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans; | 5 Year and Annual Plans | | | | | | | |
| X | PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan | Streamlined Annual Plans | | | | | | | |
| X | Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan. | 5 Year and standard Annual Plans | | | | | | | |
| X | Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement. | 5 Year and Annual Plans | | | | | | | |
| X | Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which the PHA is located and any additional backup data to support statement of housing needs for families on the PHA's public housing and Section 8 tenant-based waiting lists. | Annual Plan: Housing Needs | | | | | | | |
| X | Most recent board-approved operating budget for the public housing program | Annual Plan: Financial Resources | | | | | | | |
| X | Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure. | Annual Plan: Eligibility, Selection, and Admissions Policies | | | | | | | |
| NA | Deconcentration Income Analysis | Annual Plan: Eligibility, Selection, and Admissions Policies | | | | | | | |
| X | Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. Check here if included in the public housing A&O Policy. | Annual Plan: Eligibility, Selection, and Admissions Policies | | | | | | | |
| NA | Section 8 Administrative Plan | Annual Plan: Eligibility, Selection, and Admissions Policies | | | | | | | |
| X | Public housing rent determination policies, including the method for setting public housing flat rents. Check here if included in the public housing A & O Policy. | Annual Plan: Rent Determination | | | | | | | |
| X | Schedule of flat rents offered at each public housing development. Check here if included in the public housing A & O Policy. | Annual Plan: Rent Determination | | | | | | | |
| NA | Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies. Check here if included in Section 8 Administrative Plan. | Annual Plan: Rent Determination | | | | | | | |
| X | Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation). | Annual Plan: Operations and Maintenance | | | | | | | |
| X | Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment). | Annual Plan: Management and Operations | | | | | | | |

| LIST OF SUPPORTING DOCUMENTS AVAILABLE FOR REVIEW | | | | | | | | |
|---|---|--|--|--|--|--|--|--|
| Applicable & On Display | Supporting Document | Related Plan Component | | | | | | |
| NA | Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary) | Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency | | | | | | |
| NA | Results of latest Section 8 Management Assessment System (SEMAP) | Annual Plan: Management and Operations | | | | | | |
| NA | Any policies governing any Section 8 special housing types Check here if included in Section 8 Administrative Plan | Annual Plan: Operations and Maintenance | | | | | | |
| X | Public housing grievance procedures Check here if included in the public housing A & O Policy | Annual Plan: Grievance Procedures | | | | | | |
| NA | Section 8 informal review and hearing procedures. Check here if included in Section 8 Administrative Plan. | Annual Plan: Grievance Procedures | | | | | | |
| X | The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year. | Annual Plan: Capital Needs | | | | | | |
| NA | Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants. | Annual Plan: Capital Needs | | | | | | |
| NA | Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing. | Annual Plan: Capital Needs | | | | | | |
| X | Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA). | Annual Plan: Capital Needs | | | | | | |
| NA | Approved or submitted applications for demolition and/or disposition of public housing. | Annual Plan: Demolition and Disposition | | | | | | |
| NA | Approved or submitted applications for designation of public housing (Designated Housing Plans). | Annual Plan: Designation of Public Housing | | | | | | |
| NA | Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937. | Annual Plan: Conversion of Public Housing | | | | | | |
| X | Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion. | Annual Plan: Voluntary Conversion of Public Housing | | | | | | |
| NA | Approved or submitted public housing homeownership programs/plans. | Annual Plan: Homeownership | | | | | | |
| NA | Policies governing any Section 8 Homeownership program (Sectionof the Section 8 Administrative Plan) | Annual Plan: Homeownership | | | | | | |
| X | Public Housing Community Service Policy/Programs ☐ Check here if included in Public Housing A & O Policy | Annual Plan: Community Service & Self-Sufficiency | | | | | | |
| NA | Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies. | Annual Plan: Community Service & Self-Sufficiency | | | | | | |
| NA | FSS Action Plan(s) for public housing and/or Section 8. | Annual Plan: Community Service & Self-Sufficiency | | | | | | |
| X | Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing. | Annual Plan: Community Service & Self-Sufficiency | | | | | | |
| NA | Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing. | Annual Plan: Community Service & Self-Sufficiency | | | | | | |
| X | Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). Check here if included in the public housing A & O Policy. | Annual Plan: Pet Policy | | | | | | |
| X | The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings. | Annual Plan: Annual Audit | | | | | | |
| NA | Other supporting documents (optional) (list individually; use as many lines as necessary) | (specify as needed) | | | | | | |
| NA | Consortium agreement(s) and for Consortium Joint PHA Plans <u>Only</u> : Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection. | Joint Annual PHA Plan for Consortia: Agency Identification and Annual Management and Operations | | | | | | |

MILLINGTON HOUSING AUTHORITY

4888 Bill Knight Road P.O. Box 55 Millington, Tennessee 38053

VIOLENCE AGAINST WOMEN ACT PHA STATEMENT

The Millington Housing Authority provides or offers referrals, training and information to anyone being abused. This includes child or adult victims of domestic violence, dating violence, sexual assault or stalking.

We are a partner in the local Social Service Community Board and have referral information available for the Families in Crisis, which is our local domestic abuse program. This agency is an excellent provider of information and refuge for victims of domestic violence.

We often provide housing to victims directly from the Families in Crisis that are fleeing domestic violence and need a safe place to reside. We refer our residents to the Families in Crisis shelter, when they need enhanced safety due to domestic violence.

Our local Police Department also provides training for our residents at our Resident Activity Centers on domestic violence and self defense.

We provide the VAWA Notice to all applicants and tenants of their rights under VAWA together with the HUD 50066 form. This notice includes the Domestic Violence hotline number and web address in addition to other information.

We are in the process of amending our lease to include additional language that clearly specifies our right to bifurcate the lease to evict the perpetrator while protecting the victims from domestic violence. It clearly specifies our right to bifurcate the lease to evict the perpetrator while protecting the victim.

HA Code: TN045

MILLINGTON HOUSING AUTHORITY

4888 Bill Knight Road P.O. Box 55 Millington, Tennessee 38053

VIOLENCE AGAINST WOMEN ACT PHA POLICY

BACKGROUND

The <u>Violence Against Women and Justice Department Reauthorization Act of 2005</u> (VAWA) provides protection for tenants and family members of tenants who are victims of domestic violence, dating violence, or stalking from being evicted or terminated from housing assistance based on such acts of violence against them.

In general, the law provides, in part, that criminal activity directly relating to domestic violence, dating violence or stalking, engaged in by a member of a tenant's household, or any guest or other persons under the tenant's control, shall not be cause for termination of assistance, tenancy or occupancy rights of the tenant or immediate family member if the tenant's family is the victim or threatened victim of the abuse. The law provides that an incident or incidents of actual or threatened domestic violence, dating violence or stalking will not be construed as serious or repeated violations of the lease by the victim or threatened victim of that violence, and will not be "good cause" for termination of assistance, tenancy, or occupancy rights of a victim of such violence.

Furthermore, the law allows a PHA to "bifurcate" a lease, or remove a household member from a lease, without regard to whether a household member is a signatory to the lease, in order to evict, remove, terminate occupancy rights, or terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others, without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also a tenant or lawful occupant.

The VAWA also allows PHAs to request an individual to certify that the individual is a victim of abuse and that the incidences of abuse are bona fide. The certification must include the name of the perpetrator, and any other statutorily required information. The victim must provide the certification within 14 business days after the individual receives a request for such a certification from the PHA.

DEFINITIONS

The following definitions were incorporated into the United States Housing Act and apply to this policy:

Domestic Violence: Includes felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, by a person with whom the victim shares a child in common, by a person who is cohabitating with, or has cohabitated with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction.

Dating Violence: Violence committed by a person:

who is or has been in a social relationship of a romantic or intimate nature with the victim; and

• where the existence of such a relationship shall be determined based on a consideration of the following factors: 1) the length of the relationship; 2) the type of relationship, and 3) the frequency of interaction between the persons involved in the relationship.

Stalking: To follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate; or to place under surveillance with the intent to kill, injure, harass, or intimidate another person; and in the course of, or as a result of, such following, pursuit, surveillance, or repeatedly committed acts, to place a person in reasonable fear of the death of, or serious bodily injury to, or to cause substantial emotional harm to 1) that person; 2) a member of the immediate family of that person, or 3) the spouse or intimate partner of that person.

Immediate Family Member: A spouse, parent, brother or sister, or child of the person, or an individual to whom that person stands in loco parentis (in place of a parent); or any other person living in the household of that person and related to that person by blood or marriage.

POLICY

The following policy amends the *Admissions and Occupancy Policy (ACOP)* and the Apartment Lease by reference. Appropriate language will be added to the ACOP and Apartment lease at the next revision dates of each.

A copy of this policy is available at the main office of the housing authority. A copy will be made available on request.

Admissions and Occupancy and Termination of Assistance

Being a victim of domestic violence, dating violence, or stalking, will not be considered by the Millington Housing Authority (MHA) to be a basis for denial of assistance, or admission to public housing if the application otherwise qualifies for assistance or admission.

Incidents or threats of abuse will not be construed by the MHA as serious or repeated violations of the lease or other "good cause" for termination of the assistance, tenancy, or occupancy rights of a victim of abuse.

Criminal activity directly relating to abuse, engaged in by a member of a tenant's household or any guest or other person under the tenant's control, shall not be cause for termination of assistance, tenancy or occupancy rights if the tenant or an immediate family member of the tenant's family is the victim or threatened victim of the abuse.

Rights of the Millington Housing Authority

The MHA may bifurcate a lease, or remove a household member from a lease, without regard to whether a household member is a signatory to the lease, in order to evict, remove, terminate occupancy rights or terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others, without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also a tenant or lawful occupant, and such eviction, removal, termination of occupancy rights, or termination of assistance shall be effected in accordance with the procedures prescribed by federal, state and local law for the termination of leases, or assistance under HUD's Public Housing Program.

Certification of Abuse and Confidentiality

The MHA will require that an individual certify that he/she is a victim of abuse and that the incidences of abuse are bonafide. The certification must include the name of the perpetrator, and any other statutorily required information. The victim must provide the certification to the PHA within 14 business days after the individual receives a request from the PHA. The individual may utilize the attached *Form HUD 50066*, *Certification of Domestic Violence*, *Dating Violence*, or *Stalking* to certify the abuse to the MHA. In lieu of Form HUD 50066, the individual may provide the MHA with documentation signed by an employee, agent, volunteer of a victim service provider, an attorney, or a medical professional from whom the victim has sought assistance in addressing domestic violence, dating violence, or stalking, or the affects of the abuse, in which the professional attests (under penalty of perjury (28 U.S.C. 1746) to the professionals belief that the incident or incidents in question are bonafide incidents of abuse, and the victim of domestic violence, dating violence, or stalking has signed or attested to the documentation. In cases where the individual does not submit the required certification, the PHA may terminate assistance.

Notification to Residents

The PHA will provide notice to all residents and applicants of their rights under Section 6 of the United States Housing Act of 1937 as amended by the <u>Violence Against Women Act of 2005</u>. These rights include the residents' right to confidentiality and the limits thereof, the availability of Form HUD 50066, and that the resident may not be evicted solely on the basis that they are a victim of domestic violence. A sample notice is included with this policy.

Confidentiality

All information provided to the MHA relating to the incident(s) of domestic violence, including the fact that the individual is a victim of domestic violence, dating violence, or stalking will be retained in confidence by the MHA and will not be entered into any shared database nor provided to a related entity, except to the extent that the disclosure is (a) requested or consented by the individual in writing; (b) required for use in an eviction proceeding or termination of assistance; or, (c) otherwise required by applicable law.

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

| Annı | ıal Statement/Performance and Evaluat | ion Report | | | |
|------|---|--|-----------------------|----------------------------|----------------------|
| Capi | tal Fund Program and Capital Fund Pr | ogram Replaceme | nt Housing Fact | or (CFP/CFPRHF) | |
| _ | I: Summary | 8 1 | 8 | , | |
| | ame: Millington Housing Authority | Grant Type and Numl Capital Fund Program Replacement Housing | Grant No: TN43P045501 | 108 | Federal FY of Grant: |
| Orig | ginal Annual Statement | Reserve for Disasters/ Em | | ed Annual Statement (revis | sion no: 1) |
| | Formance and Evaluation Report for Period Ending: | | | Performance and Evaluati | |
| Line | Summary by Development Account | Total Esti | mated Cost | Total Actual C | Cost |
| No. | | Original | Revised | Obligated | Expended |
| 1 | Total non-CFP Funds | 0.00 | 0.00 | - g | |
| 2 | 1406 Operations | \$130,000.00 | \$148,973.00 | 0.00 | 0.00 |
| 3 | 1408 Management Improvements | 0.00 | 0.00 | - | - |
| 4 | 1410 Administration | 0.00 | 0.00 | - | _ |
| 5 | 1411 Audit | 0.00 | 0.00 | - | - |
| 6 | 1415 Liquidated Damages | 0.00 | 0.00 | - | - |
| 7 | 1430 Fees and Costs | 0.00 | 0.00 | - | - |
| 8 | 1440 Site Acquisition | 0.00 | 0.00 | - | - |
| 9 | 1450 Site Improvement | 0.00 | 0.00 | - | - |
| 10 | 1460 Dwelling Structures | 0.00 | 0.00 | - | - |
| 11 | 1465.1 Dwelling Equipment—Nonexpendable | 0.00 | 0.00 | - | - |
| 12 | 1470 Nondwelling Structures | 0.00 | 0.00 | - | - |
| 13 | 1475 Nondwelling Equipment | 0.00 | 0.00 | - | - |
| 14 | 1485 Demolition | 0.00 | 0.00 | - | - |
| 15 | 1490 Replacement Reserve | 0.00 | 0.00 | - | - |
| 16 | 1492 Moving to Work Demonstration | 0.00 | 0.00 | - | - |
| 17 | 1495.1 Relocation Costs | 0.00 | 0.00 | - | - |
| 18 | 1499 Development Activities | 0.00 | 0.00 | - | - |
| 19 | 1501 Collaterization or Debt Service | 0.00 | 0.00 | - | - |
| 20 | 1502 Contingency | 0.00 | 0.00 | - | - |
| 21 | Amount of Annual Grant: (sum of lines 2 – 20) | \$130,000.00 | \$148,973.00 | 0.00 | 0.00 |
| 22 | Amount of line 21 Related to LBP Activities | 0.00 | 0.00 | - | - |
| 23 | Amount of line 21 Related to Section 504 compliance | 0.00 | 0.00 | - | - |
| 24 | Amount of line 21 Related to Security – Soft Costs | 0.00 | 0.00 | - | - |
| 25 | Amount of Line 21 Related to Security – Hard Costs | 0.00 | 0.00 | - | - |
| 26 | Amount of line 21 Related to Energy Conservation | 0.00 | 0.00 | - | |

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

| Capital Fur Part II: Su | tement/Performance and nd Program and Capital apporting Pages | Fund Pro | gram Re | | Housing Fa | | | |
|---|---|--|--------------|-----------------------------------|----------------------|--------------------|-------------------|----------------------|
| PHA Name: Mil | lington Housing Authority | Grant Type an Capital Fund P Replacement H | rogram Grant | No: TN43P0455 Grant No: | 0108 | Federal FY of Gran | nt: 2008 | |
| Development Number Name/HA- Wide Activities | General Description of Major Work Categories | Dev. Acct No. | ()iiantity | | Total Estimated Cost | | aal Cost | Status of Work |
| | | | | Original | Revised | Funds Obligated | Funds Expended | |
| PHA-Wide | Operations | 1406 | 1 | \$130,000.00 | \$148,973.00 | 0.00 | 0.00 | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

| Part III: Implen | nentation S | cheut | | N T 1 | | | |
|--|--------------|--------|---------------------|---------------------------------------|--------------------------------------|--------|---------------------------------|
| PHA Name: Millington | Housing Auth | ority | Grant Type and | | 4550100 | | Federal FY of Grant: 2008 |
| | | | Replacement H | ogram No: TN43P0 ousing Factor No: | +550106 | | |
| Development Number Name/HA-Wide Activities | (Quar | | ligated ng Date) | A (Qu | ll Funds Expende uarter Ending Da | | Reasons for Revised Target Date |
| | Original | Revise | ed Actual | Original | Revised | Actual | |
| PHA-Wide | 06/12/10 | | | 06/12/12 | | | |
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8. Capital Fund Program Five-Year Action Plan

| PHA Name: Milling | gton Housing A | uthority | ☐Original 5-Year Plan ☑Revision No: 1 | | |
|--|---------------------|---|---|---|---|
| Development Number/Name/ HA-Wide | Year 1 | Work Statement for Year 2 FFY Grant: 2009 PHA FY: 2009 | Work Statement for Year 3 FFY Grant: 2010 PHA FY: 2010 | Work Statement for Year 4 FFY Grant: 2011 PHA FY: 2011 | Work Statement for Year 5 FFY Grant: 2012 PHA FY: 2012 |
| | Annual Statement | | | | |
| PHA-Wide | | 37,000.00 | 37,000.00 | 37,000.00 | 37,000.00 |
| TN43P045-001 | | 93,000.00 | 93,000.00 | 93,000.00 | 93,000.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| CFP Funds Listed for 5-year planning | | \$130,000.00 | \$130,000.00 | \$130,000.00 | \$130,000.00 |
| Replacement Housing Factor Funds | | NA | NA | NA | NA NA |

8. Capital Fund Program Five-Year Action Plan

| Capital Fund Program Five-Year Action Plan | | | | | | | | | |
|--|--|-----------------------|-------------------|--|-----------------------|-----------------------|--|--|--|
| Part II: S Activities for Year 1 | upporting Pages—Work Activities Activities for Year :2 FFY Grant: 2009 PHA FY: 2009 | | | Activities for Year: _3 FFY Grant: 2010 PHA FY: 2010 | | | | | |
| | Development Name/Number | Major Work Categories | Estimated Cost | Development Name/Number | Major Work Categories | Estimated Cost | | | |
| See | PHA-Wide | Operations | 10,000.00 | PHA-Wide | Operations | 10,000.00 | | | |
| Annual | PHA-Wide | Fees and Costs | 27,000.00 | PHA-Wide | Fees and Costs | 27,000.00 | | | |
| Statement | TN43P045-001 | Office Renovation | 35,000.00 | TN43P045-001 | Roofing | 51,570.00 | | | |
| | TN43P045-001 | HVAC | 58,000.00 | TN43P045-001 | HVAC | 41,430.00 | | | |
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| Total CFP Estimated Cost \$130,000.00 | | | | | \$130,000.00 | | | | |

8. Capital Fund Program Five-Year Action Plan

| Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities | | | | | | | | | |
|--|--|-----------------------|--|-----------------------------------|----------------|--|--|--|--|
| Turv zav suppe | Activities for Year : 4 FFY Grant: 2011 PHA FY: 2011 | | Activities for Year: _5 FFY Grant: 2012 PHA FY: 2012 | | | | | | |
| Development Name/Number | Major Work Categories | Estimated Cost | Development Name/Number | Major Work Categories | Estimated Cost | | | | |
| PHA-Wide | Operations | 10,000.00 | PHA-Wide | Operations | 10,000.00 | | | | |
| PHA-Wide | Fees and Costs | 27,000.00 | | Fees and Costs | 27,000.00 | | | | |
| TN43P045-001 | Roofing | 30,000.00 | TN43P045-001 | Site Improvements | 5,000.00 | | | | |
| TN43P045-001 | HVAC | 62,000.00 | TN43P045-001 | Building Exterior Improvements | 8,000.00 | | | | |
| | | | TN43P045-001 | Doors | 10,000.00 | | | | |
| | | | TN43P045-001 | Windows | 10,000.00 | | | | |
| | | | TN43P045-001 | Replace HVAC | 20,000.00 | | | | |
| | | | TN43P045-001 | Electrical/Lighting Fixtures | 10,000.00 | | | | |
| | | | TN43P045-001 | Plumbing | 15,000.00 | | | | |
| | | | TN43P045-001 | Finishes | 10,000.00 | | | | |
| | | | TN43P045-001 | Non-dwelling/dwelling equipment | 5,000.00 | | | | |
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| Total CFP Estimated Cost \$130, | | \$130,000.00 | | | \$130,000.00 | | | | |